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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
submitted
with Initial
Filing

☐ Declaration
Submitted after Initial
Filing (surcharge
37 CFR 1.16 (e))
required)

Attorney Docket Number

PCS9430AJTJ

First Named Inventor

Mark Edward BUNNAGE

COMPLETE IF KNOWN

Application Number

Not yet assigned

Filing Date

Filed herewith

Group Art Unit

Not yet assigned

Examiner Name

Not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PYRAZOLOPYRIMIDINONES WHICH INHIBIT TYPE 5 CYCLIC GUANOSINE 3', 5' - MONOPHOSPHATE
PHOSPHODIESTERASE (cGMP PDE5) FOR THE TREATMENT OF SEXUAL DYSFUNCTION

(Title of the Invention)

the specification of which
☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

04/10/1998

as United States Application Number or PCT International

Application Number

PCT/EP98/02257

and was amended during the PCT International
stage by letter dated March 16, 1999

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9708406.5	GB	04/25/1997	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9715380.3	GB	07/22/1997	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9722954.6	GB	10/30/1997	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.

EXPRESS MAIL NO. 2027182487605

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DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number
or

Place Customer
Number Bar Code
Label here

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	Mark Dryer	28,775
Allen J. Spiegel	25,749	Lawrence C. Akers	28,587
Paul H. Ginsburg	28,718	A. Dean Olson	31,185
J. Trevor Lumb	28,567	Mervin E. Brokke	32,723
James T. Jones	30,561	Valerie M. Fedowich	33,688
Gregg C. Benson	30,977	Bryan C. Zielinski	34,462
Robert F. Sheyka	31,304	Robert T. Ronau	36,257
Grover F. Fuller Jr.	31,760	B. Timothy Creagan	39,156
Karen DeBenedictis	32,977	Alan L. Koller	37,371
Phillip C. Strassburger	34,258	Jolene W. Appleman	35,428
Lorraine B. Ling	35,251	Kristina L. Konstas	37,864
Garth Butterfield	36,997	Kenneth B. Rubin	36,259
Carl J. Goddard	39,203	Seth H. Jacobs	32,140
Raymond M. Speer	26,810	Martha A. Gammill	31,820
Jennifer A. Kispert	40,049	Gregory P. Raymer	36,647
Jacob M. Levine	32,509	E. Victor Donahue	35,492

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☐ Customer Number
or Bar Code Label

OR ☒ Correspondence address below

Name	Gregg C. Benson				
Address	Pfizer Inc, 118S, 3rd Floor				
Address	Eastern Point Road				
City	Groton	State	CT	Zip Code	06340
Country	United States Of America	Telephone	1-(860)-441-4901	Fax	1-(860)-441-5221

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))			Family Name or Surname		
Mark Edward			BUNNAGE		
Inventor's Signature	<i>Mark Edward Bunnage</i>			Date	13 th September 1999
Residence: City	Sandwich	State	Kent	Country	GB
Post Office Address	c/o Pfizer Inc.				
Post Office Address	235 East 42nd Street				
City	New York	State	NY	Zip	10017
			Country	USA	

☒ Additional inventors are being named on the a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

+

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
John Paul				MATHIAS			
Inventor's Signature	<i>John Paul Mathias</i>					Date	16th September 1999
Residence: City	Sandwich	State	Kent	Country	GB	Citizenship	GB
Post Office Address	c/o Pfizer Inc.						
Post Office Address	235 East 42nd Street						
City	New York	State	NY	Zip	10017	Country	USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Stephen Derek Albert				STREET			
Inventor's Signature	<i>Stephen Derek Albert Street</i>					Date	13th September 1999
Residence: City	Sandwich	State	Kent	Country	GB	Citizenship	GB
Post Office Address	c/o Pfizer Inc.						
Post Office Address	235 East 42nd Street						
City	New York	State	NY	Zip	10017	Country	USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Anthony				WOOD			
Inventor's Signature	<i>Anthony Wood</i>					Date	13th September 1999
Residence: City	Sandwich	State	Kent	Country	GB	Citizenship	GB
Post Office Address	c/o Pfizer Inc.						
Post Office Address	235 East 42nd Street						
City	New York	State	NY	Zip	10017	Country	USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	